4 ∞

14020451

STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE

FUNIVI I			4 JUL II Při I: 59 Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
D. J. SMITH	1FOR D S S1	ENATIEL ELLEIG	TIIDIN COMMITTIEE
ADDRESS (number and street)	1P. O. BOX	5.9./.	
(Check if address is changed)			
	SIPIRI/MG HI	<u> </u>	K. 5 66083 - 1 1 2 IP CODE ▲
COMMITTEE'S E-MAIL ADD	RESS		
(Check if address is changed)	ldusmith Oc	dismithfore	siemation com
0 ,	Optional Second E-Mail Ad	9	
COMMITTEE'S WEB PAGE	`		
(Check if address is changed)	ldy is mutihific	pirisiemation.	aom
2. DATE 0.6	25 2014		
3. FEC IDENTIFICATION	NUMBER ▶ C	<u></u>	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined	this Statement and to the bes	t of my knowledge and belief i	t is true, correct and complete.
Type or Print Name of Treasu	irer <u>SANDRA S</u>	S. SCHULTZ	1977-1971
Signature of Treasurer	- Sonder-	I. In the	Date 0.5 3.0 2014
NOTE: Submission of false, err		may subject the person signing	this Statement to the penalties of 2 U.S.C. §437g. VITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530	

Local 202-694-1100

5.

	COMMITTEE e Committee:					
(a) X						
(b)	b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate	DELLA JEAN	SMITH (D.J.)				
Candidate Party Affiliat	ion REP Office Sought:	House X Senate Preside	State K.S nt District			
(c)	This committee supports/opposes onl	ly one candidate, and is NOT an authorized committe	e .			
Name of Candidate						
Party Co	nmittee:					
(d)	This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Political A	Action Committee (PAC):					
(e)	This committee is a separate segrega	ated fund. (Identify connected organization on line 6.) It	s connected organization is a:			
	Corporation	Corporation w/o Capital Stock	Labor Organization			
	Membership Organization	Trade Association	Cooperative			
	In addition, this commi	ittee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
	In addition, this committee is a	Lobbyist/Registrant PAC.				
	In addition, this committee is a	Leadership PAC. (Identify sponsor on line 6.)				
Joint Fund	draising Representative:					
(g)		pays fundraising expenses and disburses net proceeds of which is an authorized committee of a federal candid				
(h)	This committee collects contributions, p committees/organizations, none of which	pays fundraising expenses and disburses net proceeds ch is an authorized committee of a federal candidate.	for two or more political			
Con	nmittees Participating in Joint Fundr	raiser				
1.		FEC ID number C				
2.		FEC ID number C				
3.		FEC ID number C				
4.		FEC ID number C				

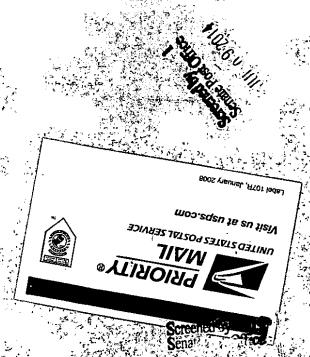
FEC Form 1 (Re	vised 02/2009)	Page 3
Write or Type Committee	Name	
D. J	SMITH FOR U.S. SENATE	
6. Name of Any Conne	cted Organization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leadership PAC Sponsor
Mailing Address		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Maining Address		
	CITY	STATE ZIP CODE
Relationship: Cor	nnected OrganizationAffiliated CommitteeJoint Fundraising R	Representative Leadership PAC Sponsor
7. Custodian of Record books and records.	s: Identify by name, address (phone number optional) and position	n of the person in possession of committee
Full Name	1.C.K.I.E. W.A.T.T.S.	
Mailing Address	SIO SE GREENRIDGE DR	
		<u>i.l. L.l.</u>
	LEES SUMMIT	MO 64063-
Title or Position	CITY	STATE ZIP CODE
CIAIMIPIAILGI	N MANAGER Telephone numb	per <u>[973]-[256-[9537</u>
8. Treasurer: List the nar	me and address (phone number optional) of the treasurer of the c	committee; and the name and address of
Full Name of Treasurer	ANDRA S. SCHULTZ	<u> </u>
Mailing Address	P. O. BOX 294	
		KS (6 C 7 /) -
Title or Position		
LIKEASURI	FIR Telephone number	er <u>913-256-9537</u>

Full Name of Designated Agent Mailing Address SILID SIE GIR ELEM RIVED GE DIR LEFES SUMMITT STATE ZIP CODE Title or Position ALSIST TREFASIVIRIE RI Telephone number 9.1.3 - 2.5.6 - 9.5.3.7 Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address SIRIC SILIC				
Title or Position AISISITI TIRE AISIURIER Telephone number 1911 3 - 121516 - 191513 7 Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. MIFICIA SI FARIGO BAIMK Mailing Address S1301 W 91511 ST CITY STATE ZIP CODE		KIE WAITIS	<u> </u>	
Title or Position AISISTI TRIE AISIDIRIE R	Mailing Address	SIDO ISIE GREENRIDGE I	R	
Title or Position AISISTI TRIE AISIDIRIE R				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. WIEILIS FARIGID BAINK Mailing Address 5131011 W 91517 List Kis Gis Gis				
Name of Bank, Depository, etc. Mailing Address Sizion Parkin Sizion State City State Zip Code		SIURIE:RIIII Telephone nu	mber 1 <u>9</u> 1	131-12,5,61-19,5,3,7
Mailing Address 5_3_0_1	safety deposit boxes or mai	ntains funds.	ttee deposits	funds, holds accounts, rents
CITY STATE ZIP CODE	WIFIL	LISI FLAIRIGIDI BAINIKI		
CITY STATE ZIP CODE	Mailing Address	5,3,01, W, 9,5,7, b, 5,7,	<u> </u>	
CITY STATE ZIP CODE			1 1 1 1	
		ONERLAIND PARK	Kısl	66207-
Name of Bank, Depository, etc.		CITY	STATE	ZIP CODE
1	Name of Bank, Depository,	etc.		
	<u> </u>		<u> </u>	
Mailing Address	Mailing Address			
CITY STATE ZIP CODE		CITY	STATE	ZIP CODE





KECORIDS OFFICE OF POBLIC





68077 0.0 Ban 25 4 1846 SPRING HILL, KS

NANCY ERICKSON SECRETARY

<u>ا</u>

40204518

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

DANA K MECALLUM SUFERINTEIDENT

HAR HATE DIFFICE DILIDING SUITE 232 WALEHINGTON, DC 20510-71 FHOME (202) 224-0322

THE PRECEDING DOCUMENT WAS:
HAND DELIVERED
USPS FIRST CLASS MAILPostmark
USPS REGISTERED/CERTIFIED Postmark
USPS PRIORITY MAIL Postmark DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL
USPS EXPRESS MAILPostmark
OVERNIGHT DELIVERY SERVICE: SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
UPS —————
DHL ————
AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION
POSTMARK ILLEGIBLE NO POSTMARK
FAXDate of Receipt
OTHERDate of Receipt or Postmark
PREPARER DH DATE PREPARED 7-11-14



SEN PATCH



SEN PATCH